

Frequently Asked Questions about Trichomoniasis

What is trichomoniasis?

Trichomoniasis, or “trich”, is a common sexually transmitted disease (STD) caused by a protozoan. Trichomoniasis can infect both women and men, although symptoms are more common in women.

How do people get trichomoniasis?

Trichomoniasis is most commonly passed through penis-to-vagina intercourse or vulva-to-vulva (the genital area outside the vagina) contact with an infected partner. Women can get trichomoniasis from having sex with infected women or men, but men usually only get trichomoniasis from infected women.

What are the signs and symptoms of trichomoniasis?

Most men with trichomoniasis do not have any signs or symptoms. If men do have symptoms, they might include irritation inside the penis, mild discharge, or slight burning sensation after urination or ejaculation.

Symptoms in women might include a frothy, yellow-green vaginal discharge with a strong odor, discomfort during intercourse or urination, or irritation and itching of the female genital area. In rare cases, lower abdominal pain can occur. Symptoms usually appear in women within 5 to 28 days of exposure.

What health risks are associated with trichomoniasis?

The genital inflammation caused by trichomoniasis can increase a woman’s risk for becoming infected with HIV if she is exposed to the virus. Also, having trichomoniasis may increase the chance that an HIV-infected woman passes HIV to her sex partner(s).

How can trichomoniasis affect pregnant women and their babies?

Pregnant women who have trichomoniasis may have babies who are born early or with low birth weight (low birth weight is less than 5.5 pounds). Premature (early) birth and low birth weight are associated with other possible health problems.

The oral medication metronidazole is an effective and safe treatment for trichomoniasis in pregnant women.

How is trichomoniasis diagnosed?

A physical examination by a health care provider and a laboratory test are needed to diagnose trichomoniasis in both men and women. The parasite that causes trichomoniasis is harder to detect in men than in women. In women, a pelvic examination can reveal small red sores on the vaginal wall or cervix (opening to the uterus) that can indicate infection with trichomoniasis.

How is trichomoniasis treated?

Trichomoniasis can usually be cured with prescription drugs, either metronidazole or tinidazole, given by mouth in a single dose. Symptoms in infected men may disappear within a few weeks even without treatment. However, even if a man does not have symptoms or his symptoms have gone away, he can continue to infect or re-infect female partners until he has been treated. Therefore, it is important that all sexual partners of persons diagnosed with trichomoniasis be examined and treated, if needed.

Persons being treated for trichomoniasis should avoid sex until they and their sex partners complete medication and the infection has cleared (they have no symptoms).

Having trichomoniasis once does not protect a person from getting it again. Even if a person is successfully treated, re-infection is possible, especially if sex partners have not been effectively treated.

How Can trichomoniasis be prevented?

The surest way to avoid getting or passing STDs is to abstain from any sexual contact, including oral, anal and vaginal sex. Other ways to lower the risk of getting or passing STDs include being in a long-term mutually monogamous relationship with a partner who has been tested and is known to be uninfected, and using latex or polyurethane condoms correctly from the beginning to the end of every sex act.

Anyone who has any unusual genital or anal symptom, such as unusual discharge, painful urination or an unusual sore or rash should stop having sex and be examined and tested by a health care provider immediately.

All sex partners of anyone diagnosed with trichomoniasis should be notified so they can be seen by a health care provider. This will reduce the risk that sex partners will develop complications from trichomoniasis and will also lower the risk of re-infection. Sexual activity should not be resumed until all partners have been tested and, if necessary, treated.

Where can I get more information?

- Your healthcare provider
- New Jersey Department of Health website: www.nj.gov/health
- Centers for Disease Control and Prevention website: www.cdc.gov/std/trichomonas/
- CDC-INFO Contact Center at:
English and Spanish
(800) CDC-INFO
(800) 232-4636
TTY: (888) 232-6348

This information is intended for educational purposes only and is not intended to replace consultation with a healthcare professional. Adapted from the Centers for Disease Control and Prevention.

Updated 4/2014